

Fill in this information to identify the case

Debtor name Damodar, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number
(if known) 19-30683☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets -- Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of
debtor's interest

2. Cash on hand

\$2,300.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm)

Type of account

Last 4 digits of
account number3.1. Checking account - Bancorp Operating AccountChecking account8 2 9 5\$9,103.643.2. Checking account - Chase Bank Account IIChecking account9 7 7 5\$4,096.39

4. Other cash equivalents (Identify all)

Name of institution (bank or brokerage firm)

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$15,500.03**Part 2: Deposits and prepayments**

6. Does the debtor have any deposits or prepayments?

- ☒ No. Go to Part 3.
☐ Yes. Fill in the information below.

Current value of
debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

9. Total of Part 2.

Add lines 7 through 8. Copy the total to line 81.

\$0.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

11. Accounts receivable

11a. 90 days old or less: \$0.00 — \$0.00 = → \$0.00
face amount doubtful or uncollectible accounts

11b. Over 90 days old: \$103,220.93 — \$0.00 = → \$103,220.93
face amount doubtful or uncollectible accounts

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$103,220.93

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

Valuation method
used for current value

Current value of
debtor's interest

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity: % of ownership:

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

\$0.00

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

- ☐ No. Go to Part 6.
☒ Yes. Fill in the information below.

General description	Date of the last physical inventory MM/DD/YYYY	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
20. Work in progress				
21. Finished goods, including goods held for resale				
22. Other inventory or supplies				
Linen Inventory				\$59,723.91
Pantry Inventory				\$805.85
23. Total of Part 5				\$60,529.76
Add lines 19 through 22. Copy the total to line 84.				
24. Is any of the property listed in Part 5 perishable?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				
25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____				
26. Has any of the property listed in Part 5 been appraised by a professional within the last year?				
<input checked="" type="checkbox"/> No				
<input type="checkbox"/> Yes				

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming or fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops--either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6.			\$0.00
Add lines 28 through 32. Copy the total to line 85.			
34. Is the debtor a member of an agricultural cooperative?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative?			
<input type="checkbox"/> No			
<input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6?			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes			

37. Has any of the property listed in Part 6 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

- ☐ No. Go to Part 8.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			
Hotel Furniture & Equipment			\$1,900,000.00

40. Office fixtures

41. Office equipment, including all computer equipment and communication systems equipment and software

42. Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

43. Total of Part 7.

Add lines 39 through 42. Copy the total to line 86.

\$1,900,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

- ☒ No
☐ Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☒ No. Go to Part 9.
☐ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
48. Watercraft, trailers, motors, and related accessories Examples: Boats trailers, motors, floating homes, personal watercraft, and fishing vessels			
49. Aircraft and accessories			
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			

51. Total of Part 8.

Add lines 47 through 50. Copy the total to line 87.

\$0.00

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☐ No. Go to Part 10.
☒ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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55.1. **9901 United Drive**
Houston, TX 77036
Building

Fee Simple

\$9,900,000.00

56. Total of Part 9.

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

\$9,900,000.00

57. Is a depreciation schedule available for any of the property listed in Part 9?

- ☒ No
☐ Yes

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

- ☐ No
☒ Yes

Part 10: Intangibles and Intellectual Property

59. Does the debtor have any interests in intangibles or intellectual property?

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
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60. Patents, copyrights, trademarks, and trade secrets

61. Internet domain names and websites

62. Licenses, franchises, and royalties

Franchise Agreement with Holiday Hospitality
Franchising, LLC

Unknown

63. Customer lists, mailing lists, or other compilations

64. Other intangibles, or intellectual property

65. Goodwill

66. Total of Part 10.

Add lines 60 through 65. Copy the total to line 89.

\$0.00

67. Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?

- ☒ No
☐ Yes

68. Is there an amortization or other similar schedule available for any of the property listed in Part 10?

- ☒ No
☐ Yes

69. Has any of the property listed in Part 10 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

- ☐ No. Go to Part 12.
☒ Yes. Fill in the information below.

Current value of
debtor's interest

71. Notes receivable

Description (include name of obligor)

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

73. Interests in insurance policies or annuities

United Specialty Insurance Company
Commercial General Liability
Policy No. IXA-18-H19603

Unknown

United Specialty Insurance Company
Automobile Liability
Policy No. IXA-18-H19603

Unknown

National Surety Corporation
Umbrella Liability
Policy No. SUO49054547-2187-4

Unknown

Travelers Casualty & Surety
Crime Policy
Policy No. 107023055

Unknown

Palomar Specialty Insurance Company
Commercial Property Insurance
Policy No. PAR-18-0001274-00

Unknown

74. Causes of action against third parties (whether or not a lawsuit has been filed)

75. Other contingent and unliquidated claims or causes of action of every nature,
including counterclaims of the debtor and rights to set off claims

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples:* Season tickets, country club membership

78. Total of Part 11.

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. Copy line 5, Part 1.	\$15,500.03	
81. Deposits and prepayments. Copy line 9, Part 2.	\$0.00	
82. Accounts receivable. Copy line 12, Part 3.	\$103,220.93	
83. Investments. Copy line 17, Part 4.	\$0.00	
84. Inventory. Copy line 23, Part 5.	\$60,529.76	
85. Farming and fishing-related assets. Copy line 33, Part 6.	\$0.00	
86. Office furniture, fixtures, and equipment; and collectibles. Copy line 43, Part 7.	\$1,900,000.00	
87. Machinery, equipment, and vehicles. Copy line 51, Part 8.	\$0.00	
88. Real property. Copy line 56, Part 9..... ➔		\$9,900,000.00
89. Intangibles and intellectual property. Copy line 66, Part 10.	\$0.00	
90. All other assets. Copy line 78, Part 11.	+\$0.00	
91. Total. Add lines 80 through 90 for each column. 91a.	\$2,079,250.72	91b. \$9,900,000.00
92. Total of all property on Schedule A/B. Lines 91a + 91b = 92.....		\$11,979,250.72

Debtor name Damodar, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 19-30683

☐ Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
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2.1	Creditor's name	Describe debtor's property that is subject to a lien	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
	<u>Alief I.S.D.</u>	<u>Building</u>	<u>\$72,178.06</u>	<u>\$9,900,000.00</u>
	Creditor's mailing address <u>P.O. Box 368</u>	Describe the lien		
	<u>Alief TX 77411</u>	Is the creditor an insider or related party?		
	Creditor's email address, if known	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Date debt was incurred	Is anyone else liable on this claim?		
	Last 4 digits of account number	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Do multiple creditors have an interest in the same property?	As of the petition filing date, the claim is:		
	<input type="checkbox"/> No	Check all that apply.		
	<input checked="" type="checkbox"/> Yes. Specify each creditor, including this creditor, and its relative priority.	<input type="checkbox"/> Contingent		
		<input type="checkbox"/> Unliquidated		
		<input type="checkbox"/> Disputed		
	1) BancorpSouth Bank; 2) BancorpSouth Bank; 3) BancorpSouth Bank; 4) Alief I.S.D.; 5) Ann Harris Bennett.			

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.

\$9,093,877.48

Part 1: Additional Page	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim
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Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

2.2	Creditor's name Ann Harris Bennett	Describe debtor's property that is subject to a lien Building	\$71,838.50	\$9,900,000.00
	Creditor's mailing address Tax Assessor-Collector P.O. Box 3547	Describe the lien 		
	Houston TX 77253-3547	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known 	Is anyone else liable on this claim? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred 	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 			
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines 2.1			

2.3	Creditor's name BancorpSouth Bank	Describe debtor's property that is subject to a lien 	\$470,336.26	\$11,800,000.00
	Creditor's mailing address Attn: Alicia Ratcliff 501 South Washington	Describe the lien 		
	Marshall TX 75670	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known 	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred 	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 			
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input checked="" type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. For Building: See 2.1. For Hotel Furniture & Equipment: 1) BancorpSouth Bank; 2) BancorpSouth Bank; 3) BancorpSouth Bank. <input type="checkbox"/> Yes. The relative priority of creditors is specified on lines _____			

Part 1: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column A
Amount of claim
Do not deduct the
value of collateral.

Column B
Value of collateral
that supports
this claim

2.4	Creditor's name BancorpSouth Bank	Describe debtor's property that is subject to a lien	\$6,987,545.07	\$11,800,000.00
	Creditor's mailing address Attn: Alicia Ratcliff 501 South Washington	Describe the lien		
	Marshall TX 75670	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 6 2 8 8			
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1, 2.3</u>			

2.5	Creditor's name BancorpSouth Bank	Describe debtor's property that is subject to a lien	\$1,491,979.59	\$11,800,000.00
	Creditor's mailing address Attn: Alicia Ratcliff 501 S. Washington	Describe the lien		
	Marshall TX 75670	Is the creditor an insider or related party? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes		
	Creditor's email address, if known	Is anyone else liable on this claim? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Fill out <i>Schedule H: Codebtors</i> (Official Form 206H)		
	Date debt was incurred	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	Last 4 digits of account number 6 3 1 5			
	Do multiple creditors have an interest in the same property? <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes. Have you already specified the relative priority? <input type="checkbox"/> No. Specify each creditor, including this creditor, and its relative priority. <input checked="" type="checkbox"/> Yes. The relative priority of creditors is specified on lines <u>2.1, 2.3</u>			

Part 2:

List Others to Be Notified for a Debt Already Listed in Part 1

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address	On which line in Part 1 did you enter the related creditor?	Last 4 digits of account number for this entity
Michael J. Durrschmidt	Line 2.3	
Hirsch & Westheimer		
1415 Louisiana Street, 36th Floor		
Wedge International Tower		
Houston TX 77002		

Debtor	<u>Damodar, LLC</u>
United States Bankruptcy Court for the:	<u>SOUTHERN DISTRICT OF TEXAS</u>
Case number (if known)	<u>19-30683</u>

☐ Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

- ☐ No. Go to Part 2.
☒ Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or part. If more space is needed for priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address <u>Atkins, Charemon</u> <u>4927 Enyart</u> <u>Houston TX 77021</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	 <u>\$0.00</u> <u>\$0.00</u>

2.2 Priority creditor's name and mailing address <u>Campbell, April S.</u> <u>12127 Plumbrook</u> <u>Houston TX 77099</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	 <u>\$0.00</u> <u>\$0.00</u>
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Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.3 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Chang, Minah</u>	<input type="checkbox"/> Contingent		
<u>534 Hlidden Harbor St.</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston</u> TX <u>77079</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.4 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Collazo Gonzalez, Flora Caridad</u>	<input type="checkbox"/> Contingent		
<u>8700 Justine Ln., Apt. 3111</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston</u> TX <u>77031</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 dlits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.5 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Correa, Luis T.</u>	<input type="checkbox"/> Contingent		
<u>16415 Pradera</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston</u> TX <u>77083</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

		Total claim	Priority amount
2.6 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Duran Miranda, Maria Guadalupe</u>	<input type="checkbox"/> Contingent		
<u>11505 Keegans Rldge #907</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston TX 77031</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.7 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Edwards, Leithia Monique</u>	<input type="checkbox"/> Contingent		
<u>16731 Beechnut St. #1008</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston TX 77083</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.8 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Fontenot, Elbert Jones</u>	<input type="checkbox"/> Contingent		
<u>3990 Bennett Rd.</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Beaumont TX 77708</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim	Priority amount
<u>\$0.00</u>	<u>\$0.00</u>

2.9 Priority creditor's name and mailing address

Gomez, Dora Alicia

9220 Bellwood Ln., Apt. 289

Houston TX 77036

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the claim is: *Check all that apply*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

2.10 Priority creditor's name and mailing address

Guess, Monique M.

2727 Skyview Point Drive

Houston TX 77047

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the claim is: *Check all that apply*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

2.11 Priority creditor's name and mailing address

Martinez, Luis Armando

9888 United Dr.

Houston TX 77036

Date or dates debt was incurred _____

Last 4 digits of account number _____

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

As of the petition filing date, the claim is: *Check all that apply*

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

		Total claim	Priority amount
2.12 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>McHan, Anthony W.</u>	<input type="checkbox"/> Contingent		
<u>10830 Golden Sunshine Dr.</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston TX 77064</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.13 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Mesa, Elizabeth</u>	<input type="checkbox"/> Contingent		
<u>8957 S. Gessner, Apt. #174</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston TX 77074</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.14 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Negron Morris, Barbara J.</u>	<input type="checkbox"/> Contingent		
<u>7500 Bellevue</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston TX 77036</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.15 Priority creditor's name and mailing address <u>Puentes, Leslie Mariel</u> <u>7502 Corporate Dr., #275</u> <u>Houston</u> TX <u>77036</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
---	--	-----------------------------

2.16 Priority creditor's name and mailing address <u>Ramos, Juana</u> <u>7500 Bissonnet</u> <u>Houston</u> TX <u>77074</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
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2.17 Priority creditor's name and mailing address <u>Ramos, Sarai</u> <u>14522 Hiram Clarke Road</u> <u>Houston</u> TX <u>77045</u> Date or dates debt was incurred _____ Last 4 digits of account number _____ Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u> <u>\$0.00</u>
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Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim Priority amount

2.18 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Ruiz, Christian</u>	<input type="checkbox"/> Contingent		
<u>6289 Wilcrest Dr., Apt. 8302</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston</u> TX <u>77072</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.19 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Siddle, Linda Lucille</u>	<input type="checkbox"/> Contingent		
<u>7600 Burgoyne, #228</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Houston</u> TX <u>77063</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

2.20 Priority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<u>\$0.00</u>	<u>\$0.00</u>
<u>Singleton, Divyne Shakem</u>	<input type="checkbox"/> Contingent		
<u>12250 S. Kirkwood Road, #1734</u>	<input type="checkbox"/> Unliquidated		
	<input type="checkbox"/> Disputed		
	Basis for the claim:		
<u>Stafford</u> TX <u>77477</u>			
Date or dates debt was incurred	Is the claim subject to offset?		
	<input checked="" type="checkbox"/> No		
Last 4 digits of account number	<input type="checkbox"/> Yes		
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(<u>4</u>)			

Part 1: Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.21 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

\$0.00

Singleton, Sharee S.

6550 Hillcroft St., #125

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Houston TX 77081

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

2.22 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

\$0.00

Sirmon, Ashlee Elizabeth

1330 Redford St.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Houston TX 77034

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

2.23 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

\$0.00

Skipper, Kevin

8162 Richmond Ave., #2001

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Houston TX 77063

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

- ☒ No
☐ Yes

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Additional Page

Copy this page if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional PRIORITY creditors exist, do not fill out or submit this page.

Total claim

Priority amount

2.24 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

\$0.00

Smith, Pamela

P.O. Box 841922

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

Basis for the claim:

Pearland	TX	77584
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Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

2.25 Priority creditor's name and mailing address

As of the petition filing date, the claim is: *Check all that apply.*

\$0.00

\$0.00

Velasquez, Guadalupe

9000 Fondren Rd., Apt. 285

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim:

Houston TX 77074

Date or dates debt was incurred

Is the claim subject to offset?

- ☒ No
☐ Yes

Last 4 digits of account number

Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a)(4)

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If more space is needed for nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim

3.1 Nonpriority creditor's name and mailing addressActive Networks5110 Lancaster StreetHarrisburg PA 17111

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

\$531.00**3.2 Nonpriority creditor's name and mailing address**American Hotel Register100 S. Milwaukee Ave.Vernon Hills IL 60061-4305

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

\$154.65**3.3 Nonpriority creditor's name and mailing address**Anytime Pest Elimination5067 Garth Rd.Baytown TX 77521

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

\$649.50**3.4 Nonpriority creditor's name and mailing address**Ascentium Capital23970 Hwy 59 NKingwood TX 77339

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
☐ Unliquidated
☐ Disputed

Basis for the claim: _____

Is the claim subject to offset?

- ☒ No
☐ Yes

\$17,847.66

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.5	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$267.95
<u>AT&T</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 105414</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Atlanta</u> <u>GA</u> <u>30348-5414</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
Last 4 digits of account number		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.6	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
<u>AT&T Global Network & Services</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 5091</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Carol Stream</u> <u>IL</u> <u>60197-5091</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
Last 4 digits of account number		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.7	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$0.00
<u>AT&T Mobility</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 6463</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Carol Stream</u> <u>IL</u> <u>60197-6463</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
Last 4 digits of account number		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	
3.8	Nonpriority creditor's name and mailing address	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$51.00
<u>Carbon's Golden Malted</u>		<input type="checkbox"/> Contingent	
<u>P.O. Box 129</u>		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim:	
<u>Concordville</u> <u>PA</u> <u>19331-0128</u>			
Date or dates debt was incurred		Is the claim subject to offset?	
Last 4 digits of account number		<input checked="" type="checkbox"/> No	
		<input type="checkbox"/> Yes	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.9</div> Nonpriority creditor's name and mailing address <u>Carbonics, Inc.</u> <u>P.O. Box 87828</u> <u>Houston TX 77287</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$30.23</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.10</div> Nonpriority creditor's name and mailing address <u>CenterPoint Energy</u> <u>P.O. Box 2628</u> <u>Houston TX 77252-2628</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.11</div> Nonpriority creditor's name and mailing address <u>City of Houston</u> <u>P.O. Box 1560</u> <u>Houston TX 77251-1560</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.12</div> Nonpriority creditor's name and mailing address <u>City of Houston</u> <u>Health Consumer FOG Prg</u> <u>7427 Park Place</u> <u>Houston TX 77087</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.13 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

\$639.39

Check all that apply.

Comcast

☐ Contingent

P.O. Box 37601

☐ Unliquidated☐ Disputed

Basis for the claim:

Philadelphia PA 19101-0601

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.14 Nonpriority creditor's name and mailing address**

As of the petition filing date, the claim is:

\$685,000.00

Check all that apply.

Dharmendra Patel

☐ Contingent

823 West Pasadena Freeway

☐ Unliquidated☐ Disputed

Basis for the claim:

Pasadena TX 77506

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.15 Nonpriority creditor's name and mailing address**

As of the petition filing date, the claim is:

\$0.00

Check all that apply.

Directv

☐ Contingent

P.O. Box 105249

☐ Unliquidated☐ Disputed

Basis for the claim:

Atlanta GA 30348-5249

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes**3.16 Nonpriority creditor's name and mailing address**

As of the petition filing date, the claim is:

\$0.00

Check all that apply.

Eagle Eye Fire Protection

☐ Contingent

4806 Enchanted Rock Lane

☐ Unliquidated☐ Disputed

Basis for the claim:

Spring TX 77388

Date or dates debt was incurred

Is the claim subject to offset?

Last 4 digits of account number

☒ No☐ Yes

Part 2:

Amount of claim

☐ Yes☐ Yes☐ Yes☐ Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.21 Nonpriority creditor's name and mailing address <u>H.E.S. Enterprise LLC</u> <u>22914 Armur Drive</u> <u>Porter</u> <u>TX</u> <u>77365</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$10,000.00</u>
3.22 Nonpriority creditor's name and mailing address <u>HD Supply</u> <u>P.O. Box 509058</u> <u>San Diego</u> <u>CA</u> <u>92150-9058</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$702.55</u>
3.23 Nonpriority creditor's name and mailing address <u>Holiday Hospitality Franchising, LLC</u> <u>Attn: Vice President,</u> <u>Franchising Licensing and Compliance</u> <u>Three Ravinia Drive, Suite 100</u> <u>Atlanta</u> <u>GA</u> <u>30346</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
3.24 Nonpriority creditor's name and mailing address <u>Houston Chronicle</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.25 Nonpriority creditor's name and mailing address <u>Hubert</u> <u>25401 Network Place</u> <u>Chicago</u> <u>IL</u> <u>60673-1254</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$809.23</u>
3.26 Nonpriority creditor's name and mailing address <u>Intercontinental Hotels Group</u> <u>P.O. Box 101074</u> <u>Atlanta</u> <u>GA</u> <u>30392-1074</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$34,486.66</u>
3.27 Nonpriority creditor's name and mailing address <u>Jayantil Patel</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$137,000.00</u>
3.28 Nonpriority creditor's name and mailing address <u>Nexus Disposal</u> <u>P.O. Box 41188</u> <u>Houston</u> <u>TX</u> <u>77241</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$431.96</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.29 Nonpriority creditor's name and mailing address <u>OBEY Imaging Supplies, Inc.</u> <u>16691 Gothard St., Unit B</u> <u>Huntington Beach</u> <u>CA</u> <u>92647</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$798.00</u>
3.30 Nonpriority creditor's name and mailing address <u>Philip Haddad</u> <u>22711 Stratford House Lane</u> <u>Katy</u> <u>TX</u> <u>77449</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$615.66</u>
3.31 Nonpriority creditor's name and mailing address <u>Piyush Patel</u> <u>2830 Wilcrest Dr.</u> <u>Houston</u> <u>TX</u> <u>77042</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$194,953.42</u>
3.32 Nonpriority creditor's name and mailing address <u>POZ Landscaping</u> <u>5909 Frondred Road, #1208</u> <u>Houston</u> <u>TX</u> <u>77036</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$325.00</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.33 Nonpriority creditor's name and mailing address <u>Pride Management Inc.</u> <u>3536 Valmont Ave.</u> <u>Beaumont TX 77706</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$25,000.00</u>
3.34 Nonpriority creditor's name and mailing address <u>Risk Advisors of America</u> <u>240 Lookout Place</u> <u>Maitland FL 32751</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$18,151.16</u>
3.35 Nonpriority creditor's name and mailing address <u>Royal Cup Coffee</u> <u>P.O. Box 206011</u> <u>Dallas TX 75320-6011</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$786.82</u>
3.36 Nonpriority creditor's name and mailing address <u>Sandhya Patel</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.37</div> Nonpriority creditor's name and mailing address <u>Source Power & Gas</u> <u>P.O. Box 203690</u> <u>Dallas TX 75320</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.38</div> Nonpriority creditor's name and mailing address <u>Summer Energy</u> <u>P.O. Box 660938</u> <u>Dallas TX 75266-0938</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.39</div> Nonpriority creditor's name and mailing address <u>Sysco Houston, Inc.</u> <u>10710 Greens Crossing Blvd.</u> <u>Houston TX 77038-2716</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$4,890.27</u>
<div style="border: 1px solid black; padding: 2px; display: inline-block;">3.40</div> Nonpriority creditor's name and mailing address <u>USA Today</u> Date or dates debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	<u>\$0.00</u>

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Internal Revenue Service P.O. Box 7346 Philadelphia PA 19101-7346	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only	_____
4.2	IRS - Special Procedures, Section II 1919 Smith St., Stop 5025HOU Houston TX 77002-8049	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only	_____
4.3	IRS - United States Attorney 1000 Louisiana, Suite 2300 Houston TX 77002	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only	_____
4.4	IRS - US Atty Gen 10th & Constitution, N.W. Washington DC 20530-0001	Line _____ <input checked="" type="checkbox"/> Not listed. Explain: Notice Only	_____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

Total of claim amounts

5a. Total claims from Part 1

5a. \$0.00

5b. Total claims from Part 2

5b. + \$1,152,858.32

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

5c. \$1,152,858.32

Fill in this information to identify the case:

Debtor name Damodar, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 19-30683 Chapter 11

☐ Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

- ☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.
- ☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining _____</p> <p>List the contract number of any government contract _____</p>	<p>Licensee</p> <p>Contract to be ASSUMED</p>	<p><u>Holiday Hospitality Franchising, LLC</u></p> <p><u>Attn: Vice President,</u></p> <p><u>Franchising Licensing and Compliance</u></p> <p><u>Three Ravinia Drive, Suite 100</u></p> <p><u>Atlanta</u> <u>GA</u> <u>30346</u></p>
2.2	<p>State what the contract or lease is for and the nature of the debtor's interest</p> <p>State the term remaining _____</p> <p>List the contract number of any government contract _____</p>	<p>Management Agreement</p> <p>Contract to be ASSUMED</p>	<p><u>Pride Management, Inc.</u></p> <p><u>1844 IH-10 South, Suite 201</u></p> <p><u>Beaumont</u> <u>TX</u> <u>77707</u></p>

Fill in this information to identify the case.

Debtor name Damodar, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 19-30683

☐ Check if this is an amended filing

Official Form 206H

Schedule H: Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Does the debtor have any codebtors?

- ☐ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☒ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, *Schedules D-G*. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor

Column 2: Creditor

Check all schedules that apply:

Name	Mailing address	Name	Check all schedules that apply:
2.1 Dharmendra Patel	823 West Pasadena Freeway <small>Number Street</small> <hr/> Pasadena TX 77506 <small>City State ZIP Code</small>	BancorpSouth Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 Dharmendra Patel	823 West Pasadena Freeway <small>Number Street</small> <hr/> Pasadena TX 77506 <small>City State ZIP Code</small>	BancorpSouth Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 Dharmendra Patel	823 West Pasadena Freeway <small>Number Street</small> <hr/> Pasadena TX 77506 <small>City State ZIP Code</small>	BancorpSouth Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 Piyush Patel	2830 Wilcrest Dr. <small>Number Street</small> <hr/> Houston TX 77042 <small>City State ZIP Code</small>	BancorpSouth Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.5 Piyush Patel	2830 Wilcrest Dr. <small>Number Street</small> <hr/> Houston TX 77042 <small>City State ZIP Code</small>	BancorpSouth Bank	<input checked="" type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor**Column 2: Creditor****2.6 Piyush Patel****Mailing address****2830 Wilcrest Dr.**

Number Street

Houston

City

TX 77042

State ZIP Code

Name**BancorpSouth Bank**Check all schedules
that apply:☒ D
☐ E/F
☐ G

Fill in this information to identify the case.

Debtor Name Damodar, LLCUnited States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXASCase number (if known): 19-30683☐ Check if this is an amended filing

Official Form 206Sum

Summary of Assets and Liabilities for Non-Individuals

12/15

Part 1: Summary of Assets**1. Schedule A/B: Assets--Real and Personal Property** (Official Form 206A/B)**1a. Real property:**

Copy line 88 from Schedule A/B.....

\$9,900,000.00**1b. Total personal property:**

Copy line 91A from Schedule A/B.....

\$2,079,250.72**1c. Total of all property**

Copy line 92 from Schedule A/B.....

\$11,979,250.72**Part 2: Summary of Liabilities****2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)

Copy the total dollar amount listed in Column A, Amount of claim, from line 3 of Schedule D.....

\$9,093,877.48**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**

Copy the total claims from Part 1 from line 5a of Schedule E/F.....

\$0.00**3b. Total amount of claims of nonpriority amount of unsecured claims:**

Copy the total of the amount of claims from Part 2 from line 5b of Schedule E/F.....

+ \$1,152,858.32**4. Total liabilities**

Lines 2 + 3a + 3b.....

\$10,246,735.80

Fill in this information to identify the case and this filing.

Debtor Name Damodar, LLC
 United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS
 Case number (if known) 19-30683

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.


I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets--Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206-Summary)
- ☐ Amended Schedule _____
- ☐ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/18/2019
 MM / DD / YYYY

X


 Signature of individual signing on behalf of debtor

Dharmendra "Danny" Patel

Printed name

Member

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name Damodar, LLC

United States Bankruptcy Court for the: SOUTHERN DISTRICT OF TEXAS

Case number (if known) 19-30683

☐ Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/16

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

☐ None

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply.

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:

From 01/01/2018 to Filing date
MM / DD / YYYY

☒ Operating a business
☐ Other

\$1,422,610.00

For prior year:

From 01/01/2017 to 12/31/2017
MM / DD / YYYY

☒ Operating a business
☐ Other

\$242,061.00

For the year before that:

From 01/01/2016 to 12/31/2016
MM / DD / YYYY

☒ Operating a business
☐ Other

\$5,000.00

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

☒ None

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers—including expense reimbursements—to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

☐ None

Creditor's name and address	Dates	Total amount or value	Reasons for payment or transfer Check all that apply
3.1. <u>See attached Exhibit 1</u> Creditor's name			<input type="checkbox"/> Secured debt
Street			<input type="checkbox"/> Unsecured loan repayments
			<input type="checkbox"/> Suppliers or vendors
			<input type="checkbox"/> Services
City State ZIP Code			<input type="checkbox"/> Other

OPPS ACCOUNT**DAMODAR LLC****Check Register**

From 11/6/2018 to 2/4/2019

Date	Vendor	Type	Number	Amount
11/8/2018	M3 Accounting Services Inc	Regular	001431	14.65
11/8/2018	Brian Huguenard-Expense report	Regular	001432	435.38
11/8/2018	H.E.S. Enterprise LLC	Regular	001433	10,000.00
11/8/2018	Intercontinental Hotels Group	Regular	001434	387.48
11/8/2018	Royal Cup Coffee	Regular	001435	135.12
11/8/2018	Sarai Ramos - Petty Cash	Regular	001436	269.67
11/8/2018	Sysco Houston, Inc.	Regular	001437	1,259.99
11/15/2018	COMPTROLLER OF PUBLIC ACCOUNTS	ACH	000024	5,925.49
11/15/2018	AT&T	ACH	000025	530.27
11/15/2018	M3 Accounting Services Inc	Regular	001438	347.07
11/15/2018	AT&T Mobility	Regular	001439	23.63
11/15/2018	Canteen Refreshment Services	Regular	001440	569.12
11/15/2018	Directv - Guest rooms	Regular	001441	1,422.98
11/15/2018	Directv - Public Space	Regular	001442	282.47
11/15/2018	Ecolab	Regular	001443	1,751.99
11/15/2018	Golden Malted	Regular	001444	161.00
11/15/2018	Guest Supply	Regular	001445	2,245.10
11/15/2018	HUBERT	Regular	001446	14.95
11/15/2018	Nexus Disposal	Regular	001447	212.79
11/15/2018	POZ Landscaping	Regular	001448	325.00
11/15/2018	Royal Cup Coffee	Regular	001449	632.75
11/15/2018	Sarai Ramos - Expense Report	Regular	001450	81.11
11/15/2018	Sysco Houston, Inc.	Regular	001451	1,548.61
11/21/2018	AT&T	ACH	000026	246.41
11/21/2018	AT&T Gobal Network & services	Regular	001452	179.88
11/21/2018	Eagle Eye Fire Protection	Regular	001453	1,333.00
11/21/2018	Intercontinental Hotels Group	Regular	001454	15,476.78
11/21/2018	Royal Cup Coffee	Regular	001455	543.33
11/21/2018	Sysco Houston, Inc.	Regular	001456	1,274.99
11/29/2018	Anytime Pest Elimination	Regular	001457	216.50
11/29/2018	Canteen Refreshment Services	Regular	001458	56.88
11/29/2018	Elbert Fontenot - Petty Cash	Regular	001459	1,750.00
11/29/2018	Liquid Waste Solutions	Regular	001460	453.34
11/29/2018	Nexus Disposal	Regular	001461	212.79
11/29/2018	Sandhya Patel	Regular	001462	3,000.00
11/29/2018	Sysco Houston, Inc.	Regular	001463	3,561.46
12/3/2018	Gates & Company, LLC	Regular	001464	800.00
12/3/2018	Pride Management Inc	Regular	001465	5,000.00
12/6/2018	M3 Accounting Services Inc	Regular	001466	366.80
12/6/2018	Anytime Pest Elimination	Regular	001467	216.50
12/6/2018	Canteen Refreshment Services	Regular	001468	237.14
12/6/2018	Ecolab	Regular	001469	1,358.92
12/6/2018	HD supply	Regular	001470	84.53
12/6/2018	HUBERT	Regular	001471	285.35
12/6/2018	POZ Landscaping	Regular	001472	325.00

OPPS ACCOUNT**DAMODAR LLC****Check Register**

From 11/6/2018 to 2/4/2019

Date	Vendor	Type	Number	Amount
12/6/2018	RC Enterprises LLC	Regular	001473	192.09
12/6/2018	Royal Cup Coffee	Regular	001474	598.45
12/6/2018	Sysco Houston, Inc.	Regular	001475	1,104.46
12/6/2018	TACC, Inc.	Regular	001476	446.00
12/13/2018	COMPTROLLER OF PUBLIC ACCOUNTS	ACH	000027	4,940.60
12/13/2018	American Hotel Register	Regular	001477	154.65
12/13/2018	AT&T Mobility	Regular	001478	23.97
12/13/2018	Canteen Refreshment Services	Regular	001479	237.14
12/13/2018	Directv - Guest rooms	Regular	001480	1,528.72
12/13/2018	Directv - Public Space	Regular	001481	286.72
12/13/2018	Guest Supply	Regular	001482	888.74
12/13/2018	HUBERT	Regular	001483	148.44
12/13/2018	Melissa VanSickles expense	Regular	001484	1,012.75
12/13/2018	Quore Systems, LLC.	Regular	001485	168.00
12/13/2018	Sarai Ramos - Expense Report	Regular	001486	214.43
12/13/2018	Sysco Houston, Inc.	Regular	001487	482.34
1/4/2019	AT&T	ACH	000028	265.38
1/4/2019	Gates & Company, LLC	Regular	001488	800.00
1/4/2019	M3 Accounting Services Inc	Regular	001489	361.63
1/4/2019	Pride Management Inc	Regular	001490	5,000.00
1/4/2019	AT&T Mobility	Regular	001491	47.94
1/4/2019	CenterPoint Energy	Regular	001492	502.33
1/4/2019	City of Houston - Utility Bill	Regular	001493	1,219.11
1/4/2019	Elbert Fontenot -(PETTY CASH)	Regular	001494	526.65
1/4/2019	Golden Malted	Regular	001495	56.00
1/4/2019	Intercontinental Hotels Group	Regular	001496	22,566.30
1/4/2019	Philip haddad (Petty Cash)	Regular	001497	430.00
1/4/2019	Sysco Houston, Inc.	Regular	001498	2,539.33
1/10/2019	Source Power & Gas	Regular	001499	2,958.46
1/10/2019	Philip haddad (Petty Cash)	Regular	001500	598.94
1/10/2019	Sarai Ramos - Expense Report	Regular	001501	302.26
1/17/2019	Gates & Company, LLC	Regular	001502	6.67
1/17/2019	AT&T Gobal Network & services	Regular	001503	359.76
1/17/2019	Ecolab	Regular	001504	225.11
1/17/2019	HD supply	Regular	001505	63.88
1/17/2019	RC Enterprises LLC	Regular	001506	87.95
1/17/2019	Red Book Solutions	Regular	001507	122.97
1/17/2019	Royal Cup Coffee	Regular	001508	160.53
1/17/2019	Sandhya Patel	Regular	001509	1,200.00
1/17/2019	Sysco Houston, Inc.	Regular	001510	573.87
1/17/2019	USA Today	Regular	001511	177.00
1/22/2019	COMPTROLLER OF PUBLIC ACCOUNTS	ACH	000029	5,049.37
1/24/2019	Carbon's Golden Malted	Regular	001512	56.00
1/24/2019	City of Houston - Utility Bill	Regular	001513	1,613.44
1/24/2019	Comcast - Telephone	Regular	001514	659.97

OPPS ACCOUNT**DAMODAR LLC****Check Register**

From 11/6/2018 to 2/4/2019

Date	Vendor	Type	Number	Amount
1/24/2019	Directv - Guest rooms	Regular	001515	1,524.47
1/24/2019	HD supply	Regular	001516	VOID
1/24/2019	HUBERT	Regular	001517	135.98
1/24/2019	POZ Landscaping	Regular	001518	VOID
1/24/2019	Royal Cup Coffee	Regular	001519	VOID
1/24/2019	Sysco Houston, Inc.	Regular	001520	783.55
1/28/2019	Ann Harris Bennett	ACH	000030	10,318.25
1/28/2019	CITY OF HOUSTON	ACH	000031	18,248.52
1/31/2019	Anytime Pest Elimination	Regular	001521	433.00
1/31/2019	CenterPoint Energy	Regular	001522	547.25
1/31/2019	City of Houston - Utility Bill	Regular	001523	420.29
1/31/2019	Golden Malted	Regular	001524	51.00
1/31/2019	Guest Supply	Regular	001525	684.61
1/31/2019	HD supply	Regular	001526	221.33
1/31/2019	Houston Chronicle	Regular	001527	712.00
1/31/2019	Nexus Disposal	Regular	001528	212.79
1/31/2019	Philip haddad (Petty Cash)	Regular	001529	VOID
1/31/2019	POZ Landscaping	Regular	001530	325.00
1/31/2019	Royal Cup Coffee	Regular	001531	10.92
1/31/2019	Sandhya Patel	Regular	001532	3,100.00
1/31/2019	Source Power & Gas	Regular	001533	2,529.28
1/31/2019	Sysco Houston, Inc.	Regular	001534	1,841.75
1/31/2019	USA Today	Regular	001535	140.13
2/1/2019	Gates & Company, LLC	Regular	001536	800.00
2/1/2019	Pride Management Inc	Regular	001537	5,000.00
2/1/2019	Chase Bank	Regular	001538	7,500.00
2/4/2019	BANCORPSOUTH	ACH	000032	89,953.42
2/4/2019	BANCORPSOUTH	Regular	001539	5,046.58
				277,054.69

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or co-signed by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$6,425. (This amount may be adjusted on 4/01/19 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. Insiders include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

☐ None

Insider's name and address	Dates	Total amount or value	Reasons for payment or transfer
4.1. See attached Exhibit 2 Insider's name Street City State ZIP Code Relationship to debtor 			

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

☒ None

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

☒ None

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

☒ None

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

☒ None

DAMODAR LLC**Paid Invoices****Company: Sandhya Patel****Vendor No:**

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
02282018	2/28/2018	4/3/2018	2/28/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid
SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)							
Account #				Amount	Description		
517425.000 Security Service				600.00	SECURITY WEEKLY INVOICE		
				600.00			

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
03072018	3/7/2018	4/3/2018	3/7/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid
SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)							
Account #				Amount	Description		
517425.000 Security Service				600.00	WEEKLY SECURITY INVOICE		
				600.00			

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
03142018	3/14/2018	4/3/2018	3/14/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid
SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)							
Account #				Amount	Description		
517425.000 Security Service				600.00	WEEKLY SECURITY INVOICE		
				600.00			

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
03212018	3/21/2018	4/3/2018	3/21/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid
SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)							
Account #				Amount	Description		
517425.000 Security Service				600.00	WEEKLY SECURITY INVOICE		
				600.00			

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
03282018	3/28/2018	4/3/2018	3/28/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid
SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)							
Account #				Amount	Description		
517425.000 Security Service				600.00	WEEKLY SECURITY INVOICE		
				600.00			

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
04042018	4/3/2018	4/3/2018	4/3/2018	600.00			Paid
				600.00	4/5/2018	001164	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY INVOICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
04112018	4/11/2018	4/11/2018	4/11/2018	600.00			Paid
				600.00	5/3/2018	001191	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY FEES
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
04172018	4/17/2018	4/30/2018	4/17/2018	600.00			Paid
				600.00	5/3/2018	001191	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
04242018	4/24/2018	4/30/2018	4/24/2018	600.00			Paid
				600.00	5/3/2018	001191	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
05012018	5/1/2018	5/1/2018	5/1/2018	600.00			Paid
				600.00	5/3/2018	001191	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
05072018	5/7/2018	5/29/2018	5/7/2018	600.00			Paid
				600.00	5/31/2018	010125	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
05162018	5/16/2018	5/16/2018	5/16/2018	600.00			Paid
				600.00	5/31/2018	010125	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Joel's cash for weekly service
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
05232018	5/23/2018	5/23/2018	5/23/2018	600.00			Paid
				600.00	5/31/2018	010125	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	MAY 2018 WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
06062018	6/6/2018	6/6/2018	6/6/2018	600.00			Paid
				600.00	6/28/2018	010138	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
06132018	6/13/2018	6/13/2018	6/13/2018	600.00			Paid
				600.00	6/28/2018	010138	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
06202018	6/20/2018	6/20/2018	6/20/2018	600.00			Paid
				600.00	6/28/2018	010138	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
06272018	6/27/2018	6/27/2018	6/27/2018	600.00			Paid
				600.00	6/28/2018	010138	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
08142018	8/20/2018	8/20/2018		600.00			Paid
				600.00	9/13/2018	001361	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Weekly Security Service
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
082120185	8/21/2018	8/21/2018		600.00			Paid
				600.00	9/13/2018	001361	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
08282018	8/28/2018	9/4/2018	8/28/2018	600.00			Paid
				600.00	9/13/2018	001361	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Joel Ochoa Security Services
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
090420158	9/4/2018	9/4/2018		600.00			Paid
				600.00	10/4/2018	001406	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Joel Ochoa Security
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
09112018	9/11/2018	9/24/2018	9/11/2018	600.00			Paid
				600.00	10/4/2018	001406	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service 069112018
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
09182018	9/18/2018	9/18/2018	9/18/2018	600.00			Paid
				600.00	10/4/2018	001406	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Services 09182018
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
09252018	9/25/2018	9/25/2018	9/25/2018	600.00			Paid
				600.00	10/4/2018	001406	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	SBS WESTCHASE SECURITY
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
10-2-18	10/8/2018	10/8/2018	10/6/2018	600.00			Paid
				600.00	11/1/2018	001428	Paid

(DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	week of 10-2-18
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
10-9-18	10/8/2018	10/8/2018	10/9/2018	600.00			Paid
				600.00	11/1/2018	001428	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	week of 10-9-18
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
10162018	10/16/2018	10/16/2018	10/16/2018	600.00			Paid
				600.00	11/1/2018	001428	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Joel security pay
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
10232018	10/23/2018	10/24/2018	10/23/2018	600.00			Paid
				600.00	11/1/2018	001428	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Joel. Security
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
10302018	10/31/2018	10/31/2018	10/30/2018	600.00			Paid
				600.00	11/29/2018	001462	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
11072018	11/12/2018	11/12/2018	11/7/2018	600.00			Paid
				600.00	11/29/2018	001462	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
11152018	11/16/2018	11/16/2018	11/15/2018	600.00			Paid
				600.00	11/29/2018	001462	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
11212018	11/21/2018	11/21/2018	11/21/2018	600.00			Paid
				600.00	11/29/2018	001462	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
11272018	11/27/2018	11/27/2018	11/27/2018	600.00			Paid
				600.00	11/29/2018	001462	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
12052018	12/7/2018	12/7/2018	12/5/2018	600.00			Paid
				600.00	1/17/2019	001509	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
12112018	12/12/2018	12/12/2018	12/11/2018	600.00			Paid
				600.00	1/17/2019	001509	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
28	1/28/2019	1/28/2019	1/24/2019	3,100.00			Paid
				3,100.00	1/31/2019	001532	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	3,100.00	security
	3,100.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
5302018	5/30/2018	5/30/2018	5/30/2018	600.00			Paid
				600.00	5/31/2018	010125	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	MAY 2018 WEEKLY SECURITY SERVICE
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
70432018	7/4/2018	7/4/2018	7/4/2018	600.00			Paid
				600.00	8/9/2018	001298	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security pay
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
7112018	7/11/2018	7/11/2018	7/11/2018	600.00			Paid
				600.00	8/9/2018	001298	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security pay
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
7182018	7/18/2018	8/7/2018	7/18/2018	600.00			Paid
				600.00	8/9/2018	001298	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service Joel Ochoa
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
7252018	7/25/2018	8/7/2018	7/25/2018	600.00			Paid
				600.00	8/9/2018	001298	Paid

DAMODAR LLC

Paid Invoices

Company: Sandhya Patel**Vendor No:**

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service Joel Ochoa
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
8012018	8/1/2018	8/13/2018	8/1/2018	600.00			Paid
				600.00	9/13/2018	001361	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service Joel Ochoa
	600.00	

Invoice #	Posted On	Due On	Invoice Date	Amount	Paid On	Check #	Status
8082018	8/7/2018	8/7/2018		600.00			Paid
				600.00	8/9/2018	001298	Paid

SBS WESTCHASE SECURITY (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

Account #	Amount	Description
517425.000 Security Service	600.00	Security Service Joel Ochoa
	600.00	

28,300.00

Part 4: Certain Gifts and Charitable Contributions

9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000

☒ None

Part 5: Certain Losses

10. All losses from fire, theft, or other casualty within 1 year before filing this case.

☒ None

Part 6: Certain Payments or Transfers

11. Payments related to bankruptcy

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

☐ None

	Who was paid or who received the transfer?	If not money, describe the property transferred	Dates	Total amount or value
11.1.	<u>Hughes Watters Askanase</u>	<u>Dharmendra Patel paid \$75,000.00</u> <u>Piyush Patel paid \$7,500.00</u>		<u>\$82,500.00</u>
	Address			
	<u>Total Plaza</u>			
	Street			
	<u>1201 Louisiana, 28th Floor</u>			
	<u>Houston</u>	<u>TX</u>	<u>77002</u>	
	City	State	ZIP Code	
	Email or website address			
	<u>www.hwa.com</u>			
	Who made the payment, if not debtor?			
	<u>Dharmendra Patel paid and Piyush Patel</u>			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.
Do not include transfers already listed on this statement.

☒ None

13. Transfers not already listed on this statement

List all transfers of money or other property—by sale, trade, or any other means—made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

☒ None

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

☒ Does not apply

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- ☐ diagnosing or treating injury, deformity, or disease, or
- ☐ providing any surgical, psychiatric, drug treatment, or obstetric care?

☒ No. Go to Part 9.

☐ Yes. Fill in the information below.

Part 9: Personally Identifiable Information**16. Does the debtor collect and retain personally identifiable information of customers?**

☒ No.

☐ Yes. State the nature of the information collected and retained _____

Does the debtor have a privacy policy about that information?

☐ No.

☐ Yes.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b) or other pension or profit-sharing plan made available by the debtor as an employee benefit?

☒ No. Go to Part 10.

☐ Yes. Does the debtor serve as plan administrator?

☐ No. Go to Part 10.

☐ Yes. Fill in below:

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts, certificates of deposit, and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

☒ None

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

☒ None

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

☒ None

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

☒ None

Part 12: Details About Environmental Information

For the purpose of Part 12, the following definitions apply:

- *Environmental law* means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).
- *Site* means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.
- *Hazardous material* means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law?

Include settlements and orders.

☒ No

☐ Yes. Provide details below.

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

- ☒ No
☐ Yes. Provide details below.

24. Has the debtor notified any governmental unit of any release of hazardous material?

- ☒ No
☐ Yes. Provide details below.

Part 13: Details About the Debtor's Business or Connections to Any Business

25. Other businesses in which the debtor has or has had an interest

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

- ☒ None

26. Books, records, and financial statements

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

- ☐ None

Name and address

Dates of service

26a.1. **Gates & Company, LLC**

From _____ To _____

Name

c/o Tim Gates

Street

P.O. Box 1238

Sulphur **LA** **70664**

City State ZIP Code

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

- ☐ None

Name and address

Dates of service

26b.1. **Gates & Company, LLC**

From _____ To _____

Name

P.O. Box 1238

Street

Sulphur **LA** **70664**

City State ZIP Code

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

- ☐ None

Name and address

If any books of account and records are unavailable, explain why

26c.1. **Gates & Company, LLC**

Name

P.O. Box 1238

Street

Sulphur **LA** **70664**

City State ZIP Code

Damodara C

Name

Name and address

If any books of account and records are unavailable, explain why

26c.2. **Pride Management Inc.**

Name

3536 Valmont Ave.

Street

Beaumont

City

TX

State

77706

ZIP Code

- 26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

☐ None

Name and address

26d.1. **BancorpSouth Bank**

Name

Attn: Alicia Ratcliff

Street

501 South Washington**Marshall**

City

TX

State

75670

ZIP Code

27. Inventories

Have any inventories of the debtor's property been taken within 2 years before filing this case?

☒ No.

☐ Yes. Give the details about the two most recent inventories.

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
------	---------	-------------------------------------	-----------------------

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

☒ No

☐ Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
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30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

☐ No

☒ Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
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30.1. **See attached Exhibit 3 and Exhibit 4**

Name

Street

City

State ZIP Code

Relationship to debtor

DAMODAR LLC

Unpaid and Paid Invoices

Company: Dharmendra Patel**Vendor No:**

<u>Invoice #</u>	<u>Posted On</u>	<u>Due On</u>	<u>Invoice Date</u>	<u>Amount</u>	<u>Paid On</u>	<u>Check #</u>	<u>Status</u>
09192018	9/25/2018	10/1/2018	9/25/2018	930.51			Paid
				930.51	9/27/2018	001379	Paid

IHG Brand Standard Guest Supplies & Resources (DAMODAR LLC - STAYBRIDGE SUITES - WESTCHASE)

<u>Account #</u>	<u>Amount</u>	<u>Description</u>
117187.000 Guest Supplies	930.51	823 W. Pasadena Frwy
	930.51	
	930.51	

DAMODAR LLC

Unpaid and Paid Invoices

Company: Piyush Patel**Vendor No:**

<u>Invoice #</u>	<u>Posted On</u>	<u>Due On</u>	<u>Invoice Date</u>	<u>Amount</u>	<u>Paid On</u>	<u>Check #</u>	<u>Status</u>
LOAN	8/24/2018	8/24/2018	8/24/2018	6,000.00			Paid
PAYBACK				6,000.00	10/4/2018	001391	Paid

(DAMODAR LLC)

<u>Account #</u>	<u>Amount</u>	<u>Description</u>
2608.000	6,000.00	Loan Payable - Piyush Patel
	6,000.00	
	6,000.00	

Debtor

Damodara C
Name

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Case number if known

19-30683

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

- ☒ No
☐ Yes. Identify below.

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

- ☒ No
☐ Yes. Identify below.

Part 14: Signature and Declaration

WARNING — Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 02/18/2019
MM / DD / YYYY

X



Printed name Dharmendra "Danny" Patel

Signature of individual signing on behalf of the debtor

Position or relationship to debtor Member

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

- ☒ No
☐ Yes